

Clark County Department of Building

Fire Prevention Bureau

4701 W Russell Rd • Las Vegas, NV 89118 • Phone: (702) 455-7100 • Fax: (702) 221-2179

Escrow Account Application

* * Print or type all requested information * *		
Application Date:	FP Escrow Account #:	
Check Type:		lose
ESCROW ACCOUNT INFORMATION		
Company/Escrow Name:		
Dept/Branch:		
Mailing Address: (Where escrow activity statements will be directed)		
City, State, Country, Zip Code:		
Company Phone Number:	Company Fax Number	::
Company E-Mail Address:		
APPLICANT/ACCOUNT MANAGER INFORMATION		
Applicant/Account Manager Name:		
Applicant Phone #: F	Fax #:	
Applicant E-Mail Address:		
AUTHORIZED USER INFORMATION (All individuals authorized to sign Fire Prevention applications and/or access account information)		
Check Type: Add Inactivate		
Print Last Name, First Name	Print Last Name, First Na	ame
1	2	
3	4	
5	6	
Customer note: An escrow account will only be created if there are funds to be deposited, resulting from a company check, cash, money order, or overpayment/escrow transfer. For new accounts, please mail or hand-carry this form to the address listed above with account deposit. If updating account information only, you may fax or email this form to the number or email listed above.		
** This form must be signed by the Account Manager referenced above. **		
Applicant/Account Manager Name and Title	Applicant/Account Manage	r Signature
Fire Prevention Bureau Finance Use Only		
FEA Account#: Date Process	Pi	rocessed By:
Wahaita: http://www.clarkcountyny.gov/Dants/dayalonment_sary		